

- a. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the above fees is enclosed.
- b. ☒ Please charge my Deposit Account No. 20-1430 in the amount of \$ 10940.00 to cover the above fees.  
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 20-1430. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**NOTE:** Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:

Kevin Bastian  
TOWNSEND AND TOWNSEND AND CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, CA 94111-3834

SIGNATURE

Kevin Bastian  
NAME

34.774  
REGISTRATION NUMBER

FEE VALUE ACCOUNTABILITY	
DEPOSIT ACCOUNT NO.	
20	1430
FEE CODE	VALUE
1614	600
1615	50

60739539 v1

09/07/2008 16:08:55 00000158 201430 10528322

01 F011317	130.00	00
02 F011318	4350.00	00
03 F011319	6400.00	00
04 F011320	330.00	00

07/07/2006 07:00:01 00000016 201430 10528323

01 F011314	600.00	00
02 F011315	50.00	00